

APPLICATION FOR BASIC POLICE TRAINING TENNESSEE LAW ENFORCEMENT TRAINING ACADEMY 3025 LEBANON ROAD NASHVILLE, TN 37214-2217

Name		Socia	al Security No	
Name(First)	(Middle)	(Last)	,	
Mailing Address				(Zip Code)
Home Telephone		Age	Date of Birth	(Zip code)
Height	Weight	Race	Sex	
Notify in Emergency_	Name			
Do you smoke? Ye			Relationship	Telephone
BASIC POLICE SCHO	OOL:			
Date of School				
Alternate Date (If abov	ve date is filled)			
EMPLOYMENT HISTO	ORY:			
Name of Present Emp	loyer			
Are you presently emp	oloyed as a full-time con	nmissioned law enforceme	nt officer? Yes	No
Date of full-time comm *(A cop	nission by present emplo by of commission card, o	oyeror employee ID card if not	commissioned, must be at	tached.)
Title/Rank of your pres	sent Position:			
Have you had prior lav	w enforcement experien	ce? Yes No		
If you have prior law e	nforcement experience	(before the above date) gir	ve name of law enforceme	ent agency and date(s).
Have you been a certi	fied officer in TN or ano	ther state? Yes	No	
If yes, give the date ar	nd state			
What was your occupa	ation prior to entering la	w enforcement?		,
What is your reason fo	or entering the law enfor	rcement profession?		

(continued on back)

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EDUCATIONAL BACKGROUND:

If no, give highest grade cor	mpleted
If no, do you have a GED C	ertificate? Yes No
Give date and place GED C	Certificate was issued
List schools attended after h	nigh school (College, Trade, etc.) and give dates and degrees
Have you been arrested or (If yes, attach explanation)	charged with any criminal violation? Yes No
Are you physically able to pe	erform vigorous physical activities? Yes No
Date FOLLOWING IS TO BE COM	Signature of Applicant MPLETED BY THE APPLICANT'S EMPLOYMENT AGENCY
FOLLOWING IS TO BE COM	
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